## MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO. 10/562661 APPLICANT(S)

FILING DATE

## **CLAIMS**

	AS FILED		AFTER 1"AMENDMENT		AFTER 2 MAMENDMENT	
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TOTAL CLAIMS			18			
PTO - 1360 (REV. 11/04)						

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TOTAL IND.	1
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TOTAL CLAIMS	

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